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INSANITY.

[Communicated for the Boston Medical and Surgical Journal.]

THE erroneous principles of practice so general in this disease, call for the diffusion of information on the subject through the pages of the public journals.

From the writings of the justly celebrated Dr. Rush, we have derived most of our views of the treatment of insanity. They are in the hands of almost every practitioner in the country, and are held in the high estimation to which their merit justly entitles them. Yet very few New England physicians subscribe fully to his views of bloodletting as a remedy. They neither admit the correctness of his indications, nor accord with him in the extent to which the remedy should be carried, in the treatment of acute diseases. Very few physicians have sufficient practice in insanity to gain much experience, or to form just conceptions, of the nature of the excitement which is exhibited in the ravings of the maniac; and it is almost exclusively for recent cases of violent mania that the general practitioner is called to prescribe. He generally meets his patient in the full excitement of his paroxysms, when the muscular energies have been brought into the most vigorous activity, the feeling greatly excited, and the action of the heart made strong and violent by exertion. Hence the almost universal opinion that in mania there is inflammation, which must be treated by copious and repeated bleedings.

It is to correct this general impression that the views of eminent medical men are occasionally communicated to your Journal. Not that we would proscribe bleeding in mania, but that its value as a remedy may be duly estimated, and that it may not be too indiscriminately prescribed, or be carried too far, by which there can be no possible doubt much mischief, that is irreparable, has been done.

The following language of Dr. Prichard, in a recent work on insanity, will show the estimation in which he held this remedy, and the condition in which he would prescribe it.

" From the fact that the proximate cause of madness is so nearly allied to inflammation, it does not follow with certainty that the disease is to be cured by the simple use of antiphlogistic remedies. The physician who would proceed to treat cases of madness as instances of simple inflammation of the brain—who would expect to cure it at once,

like any other local inflammatory disease, by the direct operation of antiphlogistic means—would very often find himself greatly disappointed. He would meet with many cases in which no perceptible benefit arises from bleedings and evacuations of all kinds, generally or locally applied, and combined with the whole series of remedies, supposed to be required by the existence of organic inflammation. *Many patients would sink under such a course of treatment; if carried on incalculably, it would leave the disease undiminished and exhaust the powers of life.*"

The learned author might with great truth and propriety have added—that indiscriminate and copious bleeding, if it did not produce fatal exhaustion in the cases which he describes, would sink his case from one of raving to one of imbecility, bordering upon dementia, and thus greatly diminish the probability of a cure. But it is generally true that some little time after copious bleeding, the maniacal paroxysms become more violent, which is considered proof that the remedy is still indicated; but repetition after repetition will exhibit the same result, till the equilibrium of the circulation is so disturbed that a long time is required to restore the healthy balance; the head is hot and the extremities are cold; the pulse are small; the capillary system inactive; the bowels sluggish; the nervous system alone exhibits indication of excitement, which will continue to increase just in proportion as the energies of life are prostrated by active depletion.

I once prescribed for a recent case of insanity, in which by eighteen bleedings the patient lost thirty pounds of blood in five or six weeks. By this bold and active course of depletion no benefit whatever was gained; the excitement was not diminished, the vigilance was not removed, nor the illusions of insanity banished from the mind. The patient, a vigorous young man, was by this course made pale and exanguineous, but his pulse were still full and bounding as at first. A different course of remedies succeeded in removing the insanity, but the mind received a shock from the disease or the remedies, from which it never wholly recovered, although insanity was removed in six months and has never returned.

Similar cases frequently come under my observation, one very recently, which was a case of dementia, of a few weeks continuance. During this period, the patient, a young man of 24 years of age, had been freely bled four times. When he first came under my care, his pulse were small and sluggish, his extremities cold and purple, his physical energies prostrated, so that he would stand motionless and inactive for a long time; the powers of his mind were no less prostrated than those of the body; he was, in fact, in a state of complete dementia, to which the active depletion doubtless greatly contributed.

A case of recent insanity, in which active depletion was prescribed in the early period of the disease, lately came under my care. The powers of body and mind were entirely prostrated, so much so that the patient was not able to recognize one of his relatives, nor indeed to express an idea in a regular sentence, or even communicate his wants for months; and he gradually sunk down with marasmus, and died.

Drs. Cullen and Rush are the most respectable advocates of blood-letting in this disease. Dr. Prichard is himself in favor of it to a limited extent. Drs. Haslim and Burrows object to general bleeding, but approve of abstracting blood locally, by cupping and leeching. They would generally confine the use of this remedy to *recent cases* of plethoric habits.

Pinel and Esquirol, and many other respectable writers whose experience entitles their opinion to great weight, object to general bleeding as a remedy in insanity. The learned and ingenious Dr. Todd, Physician to the Retreat for the Insane in Hartford, Con., rarely abstracted blood in any manner from persons afflicted with insanity. Few men can boast of such success as he had in recent cases. It was the opinion of this eminent practitioner that insanity was rarely benefited by evacuations of any kind. Esquirol observes that he has seen madness increased after an abundant flow of catamenia, and likewise after two or three bleedings. "In such cases melancholy dejection has passed into furious madness." He approves, however, of bleeding in plethoric habits, and when some habitual evacuation has been suppressed.

Dr. Shute, of the Gloucester Lunatic Asylum, prescribes neither bleeding, leeches, cupping, blisters, or drastic purges, "and yet," Dr. Prichard observes, "among the patients admitted to this hospital, a large proportion of recoveries take place, and no cases of sudden apoplexy or hemiplegia have yet happened."

Other and safer modes of diminishing and equalizing excitement are in common use, and receive the unqualified approbation of Dr. Prichard and other eminent practitioners. Of these, the application of cold to the head and warmth to the feet is decidedly beneficial. The shower bath and tepid bathing, and the use of laxative medicines to keep up a regular action of the bowels, are generally approved when judiciously prescribed. Antimonials are differently appreciated. Some eminent practitioners approve of them, while others discard them. Narcotics are extensively used in the institutions of New England. Dr. Todd thought very favorably of them, particularly of opium, stramonium, hyoscyamus and conium, and used them more extensively, probably, than they had ever previously been used in this country or Europe. He was very successful in the use of the conium in all cases, chronic and acute, when the glandular system was much affected, and where the secretions were vitiated, which is frequently the condition of the insane. Digitalis has received high commendations from some experienced individuals; others have been disappointed of the good effects which they had expected from so active a narcotic. Dr. Johnson speaks favorably of hyoscyamus, and thinks little of stramonium and belladonna. Prussic acid and nux vomica may yet be found valuable remedies in some forms of maniacal excitement; though they have not as yet been used to any considerable extent.

Opium, says Dr. Prichard, is far from being a remedy generally admissible in cases of insanity; yet there are instances in which it is decidedly useful. Very contradictory accounts are given of the effects of opium in mania. Its very extraordinary effects in some cases show its

power of controlling excitement in some forms of this disease. Used with discrimination, it doubtless possesses great power in mania. Where the excitement is purely nervous, it controls it, in many instances, in a most surprising manner. Dr. Burrows gives opium in doses of five grains, and repeats smaller doses frequently till its influence is fully felt. Van Swieten gave fifteen grains at a dose. Dr. Binns, of Liverpool, gave two scruples, and another scruple afterwards, and it is said restored the patient immediately. Dr. Currie gave 400 drops of laudanum to a maniac in the greatest possible furor, which acted like a miracle, for in a few hours the patient became calm and rational. M. Dupuytren gave opium by enema in mania. Dr. Sims gave, in a case related by Dr. Burrows, to a delicate lady, two hundred and fifty-seven drops of Battley's solution of opium in twenty hours—probably equal to from 550 to 600 drops of laudanum.

No remedy has probably produced more surprising effects in maniacal excitement, than opium; and yet if used indiscriminately, or without some preparation, in the early period of recent disease, it would be dangerous in the extreme, particularly as little advantage is gained from it in moderate doses, and large doses may do much mischief if injudiciously administered.

Calomel, combined with opium, in recent cases of insanity, often qualifies its action so as to insure favorable results from it, where it might be injurious if given alone. Calomel alone, or in this combination, often proves beneficial, if the secretions are diminished or vitiated.

On the subject of diet for the insane, the views of the public are no less erroneous than respecting medication. The diet of the maniac should be generous and liberal, as a general rule, and, so far as my experience goes, should never be abstemious or extremely simple. The excitement under which he labors exhausts the principles of life with great rapidity; hence the constant demand for food, in a large proportion of the insane, and the desire of stimulants so common with all, even those who are rigidly temperate during health. If this want is but partially supplied, the patient will be in perpetual irritation, uneasy, restless, and unhappy. With a full and generous diet, he will be quiet and contented. If this irritation is not quieted, the patient cannot be benefited by medical or moral treatment. The confidence cannot be gained till he is satisfied of the favorable intentions of those who hold him in charge. Of this he will not be satisfied while he suffers from hunger or the irritation which arises from paucity or poverty of diet.

Great changes in diet cannot be suddenly made in health with impunity, and especially when the system is subject to unusual causes of exhaustion. If the vital principle of the stomach is not met by corresponding stimulants, so as to balance it, this principle accumulates and the actions become diseased. This fact is too little regarded in dietetics. The same is true of other organs and of the whole system. If the excitability of the organs thus accumulates, the quantity of stimulants that they have been accustomed to receive will excite unhealthy actions, and pain and disease will follow. The eye bears the light of day with pleasure; it is accustomed to bear it, and no inconvenience is felt

while it is daily subjected to the stimulus of light. Place a person in a dark room for a day or two, and then expose him to the light which has before been so agreeable, and the eye is rendered insupportably painful and becomes at once diseased, if it is not withdrawn. The same is true of the stomach. The seaman that is in good health, who is put upon an allowance of food for some days, or weeks, from scarcity of stores, cannot, on being supplied, take half his accustomed meal, without imminent danger. The celebrated Dr. Rush, during the prevalence of the yellow fever in Philadelphia, in 1793, adopted such a course of abstinence, and consequently produced such a state of irritability of his stomach and general system, that he declares that a teaspoonful of wine received into his mouth, and not swallowed, excited him more than a glassful drank under ordinary circumstances.

I was consulted some time since by a gentleman, who, by dyspepsia and neuralgia, had become extremely reduced, and excessively irritable. His pain was insupportable, and he was feeble in body and mind. I ascertained that food distressed him exceedingly, and he had reduced the quantity and quality of his aliment so as to afford him a bare subsistence. He had taken no animal food for three years, and used no condiments. He informed me that the most trifling quantity of meat, taken into the stomach, would produce the excitement of a full meal formerly, and gave him very unpleasant sensations. I prescribed animal diet, tonics and narcotics, to be cautiously commenced, but to be persevered in till his diet should have a full proportion of meat, and directed some wine with his dinner. The neuralgia was almost immediately mitigated, and finally nearly or quite left him; his dyspepsia was much better, and he gained strength and spirits rapidly. He has since crossed the Atlantic twice on business, and is in very comfortable health —feeling no disposition to return to his former mode of living.

A young gentleman who had just graduated from one of the New England colleges, consulted me for dyspepsia, and a most distressing nervous irritability, by which he was reduced to extreme suffering and great debility. His diet had been reduced from one substance to another, till he confined himself to wheat gruel and bread. In this situation I saw him. I advised him to commence animal food cautiously, till he could make it a full share of his diet; gave him iron, with a laxative, and a little wine or brandy with his dinner. He immediately improved, in three months was well, and at the end of a year had gained forty pounds of flesh and appeared in robust health and fine spirits.

I have seen many insane persons with excessive irritability, which was constantly expended in noise and violence, in tearing of apparel and bedding, become calm, tractable, and good humored, by a change from spare to full diet, and from depletion and antiphlogistic remedies to a narcotic and tonic course. An insane lady recently came under my care who was exceedingly irritable and ill natured. She had for some weeks been filthy in the extreme, and was noisy and vulgar. She was under a course of antiphlogistic remedies, and on a spare and low diet for some months. The course was immediately changed. She took tonics and narcotics, and a full and generous diet. In a very few days

she was calm, cleanly, and pleasant, perfectly satisfied with her situation, and grateful for all favors. She slept quietly, gained flesh, and in six weeks was perfectly restored.

A hale, robust man, of abstemious habits and very laborious, was attacked, after an unusual mental effort of some days continuance, with *mania ferox*. His violence was extreme; he was entirely unconscious where he was, or what was done for him, and who administered to his wants. He was repeatedly bled largely, took drastic cathartics, and the most rigid diet. When he came under my care, after being in this condition a month, his appearance was haggard, emaciated, pale and bloodless—his extremities cold, and the surface of his body covered with sores, the effect of his violence. He was dangerous to approach, as his fury extended alike to all who came in his way. He was placed under a directly opposite mode of treatment. Tonics and narcotics, with wine, were administered with a liberal hand. His diet was animal food, bread, tea, coffee, and vegetables, with fruits. He ate freely, and was always hungry. In ten days he was calm and rational, his feelings composed and tranquil, his sleep quiet and refreshing. His recovery was surprisingly rapid. In four weeks his insanity was gone, and he had no remains of disease but the effects of the vigorous reduction to which he was in the first instance subjected.

Cases of this description are almost daily coming under my observation, and the result of the treatment has taught me an important practical lesson in insanity—not to mistake excessive nervous action for inflammation, nor be led to consider the great muscular power of the maniac any proof of the strength and vigor which requires active depletion.

W.

June, 1837.

#### CORROBORATIVE TESTIMONY IN FAVOR OF LARGE DOSES OF OPIUM IN RHEUMATISM.

[Communicated for the Boston Medical and Surgical Journal.]

As we are often at a loss, when any new medicine or new treatment of any particular disorder is recommended, whether to employ it or not, being very often disappointed in such cases, it is highly important that all the evidence for or against such medicine or treatment should be communicated. One or two or half a dozen successful terminations of a disorder, do not always establish the fact that the treatment made use of in such disorder was the most judicious.

These ideas suggested themselves by reading Dr. Webb's highly valuable Prize Dissertation upon Rheumatism, and afterwards comparing his views in regard to its cure with my own experience. Having been very friendly to the use of opium, either alone or in combination with other medicine, as a remedial agent in many complaints, it occurred to my mind that it would be a proper remedy in rheumatism, and I long ago made use of it in that disorder.

The first time I employed it to a sufficient extent to satisfy myself of

its superior qualities in such a complaint, was in the month of June, 1823, in the case of S. C., of C., N. H. When I first saw him he was affected with considerable thirst, dry and hot skin, quick and strong pulse, swelled joints in the lower extremities, with redness and tenderness in some parts of them, and extreme pain. The redness and tenderness, together with an inability to move without increasing the pain, induced me to pronounce it acute rheumatism.

I took from his arm twenty-six ounces of blood, had him so situated in bed as to favor a gentle and long-continued diaphoresis, and administered a powder of opii. grs. ii. gum. camph. pulvis ipecacuan. aa gr. i. every four hours. In a little while the skin was soft, its heat moderated, and gentle sweating produced, continuing until the cure was effected, which, by keeping up the opium practice, was accomplished in four or five days. The same pleasurable sensations spoken of by Dr. Webb were experienced to a remarkable degree. I did not confine myself to exactly two grains of opium during the whole time, but varied a little, giving sometimes more and sometimes less, according to circumstances. My object was to keep him under the influence of opium to as high a degree as he would bear.

The next patient that was treated in this way, which I shall mention, was J. F., of T. It was much such a case as the former, only there was more febrile affection. I have selected this case mostly because before, and at the time my services were called for, he was so prejudiced against opium as to be unwilling, knowingly, to take it, or have it used in his family. On this account I had to give it to him without his knowledge. The treatment, excepting that the opium was given in larger doses, was exactly the same as in the preceding case. He had taken it but a short time ere he began to receive so much benefit from it, and experience such pleasurable sensations, that he was very earnest to have me tell him what he had been taking. I hesitated at first, but on his promising not to be displeased, I told him it was opium. "Well," said he, "if opium has done this, I will never set up my will against it again." By its curing him so suddenly, and leaving him much more healthy afterwards, when in former instances he had been sick three times as long, he could not cease to mention how much his opinion had changed in regard to it.

The case, treated in this way, which has left the next strongest impression upon my mind, was that of a young lady, Miss. M. E., of T. The swelling, pain, and redness, were more changeable from one place to another in this, than in the former cases. The joint or limb that was swollen would be twice as large as that which was not. Sometimes the upper extremities would be most affected, and sometimes the lower. Sometimes the disease would be most severe upon one side, and sometimes upon the other. No part would be entirely free from the affection. Besides the swelling and pain, there was such a soreness upon all the joints and over the whole body, that not even a finger could be moved without a screech. I bled her three times, taking a pint each time. After the third bleeding, the remedial effect of the opium was more apparent than before. The diaphoresis was more regular, the

swelling more reduced, the pain and soreness more mitigated, and the pleasurable sensations more observable.

In all these cases, the diaphoresis and the pleasurable sensations from the opium, after it had taken effect, were pretty much alike. In all the cases, the treatment in every respect was so satisfactory, that the patients could not help speaking of it at the time and for a long time afterwards. From the happy and satisfactory termination of these cases, I was so applauded, though I speak not of it from vanity, but to show the effect of the medicine, that hundreds of patients, *not* affected with rheumatism, put themselves under my care, who would probably have sought for aid from a different source, had it not been for this.

Two other cases present themselves to my recollection, which I should be glad to speak of, but as an account of them would extend my article to too great a length, I shall defer them until another opportunity.

I stated at the commencement of this piece, that I was always favorably disposed towards opium as a curative agent in many disorders. This was not the only thing that induced me to make use of it in rheumatism. I had a decayed tooth, which, on account of its being so firmly set in my jaw, could not be extracted. The pain I suffered from it was beyond endurance. I had been troubled with it more or less every day for a month. At length it commenced, one summer evening, just I was retiring to rest, more agonizing and more excruciating than I had ever experienced it before. I flung myself upon my bed, but could get no rest. I got up and walked the room, but it really seemed that if any body ever died with the toothache, I should. I furnished myself with a piece of opium, and bit off a piece as big as a pea, but it did no good. In half an hour I swallowed as much as I did before, but with no better success. The pain continued all night; I continued walking and screeching, and now and then, without much consideration, biting off and swallowing a piece of opium. I experienced no more effect from it, until daylight appeared, than from a piece of chalk, and then the toothache stopped and the opium began to operate. It had so much effect upon me then, that I called a number of persons and charged them strictly, besides doing some other things, to keep me from going to sleep. By spitting, rubbing, and shaking me, and continually talking to me, they prevented me from falling into what would very likely have been the sleep of death. At length, from some appropriate medicine which I had taken, I commenced vomiting, when such a change was produced in my feelings, that I experienced no longer the bad effect of the opium. During that and the next day, I was the happiest creature that ever was. Nothing troubled me, everything appeared to look delightful, and I had not a moment's pain with the toothache for two years, though I had not been free from it a month at a time for two years before. This, and one other circumstance which I intend to mention at another time, suggested to me the benefit that might probably be derived from large doses of opium in rheumatism.

Boston, May, 1837.

SAMUEL FISH.

## CONGENITAL FISSURES OF THE PALATE.

[Communicated for the Boston Med. and Surg. Journal.]

IT is remarkable that until lately surgeons have never achieved the union of the congenital fissures of the palate by an operation. Defective conformation of this membrane is a perpetual source of embarrassment. It interrupts deglutition, renders enunciation unintelligible, and disqualifies the individual for the active pursuits of life. When we consider these results of incapacity, together with the feasibility of the operation, we are astonished it was never attempted until 1816, when the fissure was first united by Prof. Graefe, in Germany. In 1819, M. Roux performed it in Paris, upon Dr. Stevenson, a young American physician, and subsequently upon many others, so that, as Velpeau says, persons from all parts came to Paris to witness the performance of *staphyloraphy*, which soon took rank among the delicate, but regular operations of surgery. Stevenson made known his cure in London, in a thesis defended in 1821, and in the year following it was accomplished for the first time in England by Mr. Alcock, and not long after in America by Dr. Warren, of Boston, and Drs. Hosack and Stevens in New York.

My attention was first attracted to a case of this nature by the parents of a child four years old. But its extreme youth, the extent of the fissure, the irritability of the parts involved in its formation, made me abandon the idea of an operation that requires for its success the unflinching spirit of maturer years. Recently, however, I have performed it upon a young gentleman in whom the natural division extended through the uvula and velum to the bones of the palatine vault. The fissure assumed a triangular shape, but when its floating edges were irritated, all remains of a palate were obliterated by violent contractions. Its length was nearly two inches in the median line; its breadth, at the basis, an inch and a half, and at its attachment with the bones it terminated in a semicircular form. By subjecting the throat to the frequent contact of foreign bodies, the involuntary movements in a few weeks became diminished. This preliminary step is almost indispensable; still no precaution can overcome these convulsions, nor check the profuse secretions which are poured from the glands and mucous surfaces of the mouth when the ligatures are inserted and the excisions made. These secretions fill the mouth with great rapidity, and of necessity render the steps of the operation slow and tedious.

*Staphyloraphy* requires but few instruments for its performance, and those which ingenuity suggests will answer. I conveyed the needle behind the membranous curtain, and transfixed it forwards, with a jeweller's *pin vice*. This instrument embraces the needle firmly, and is easily disengaged from it by slipping the ring with the fore finger, while the needle may be drawn out with a pair of dressing forceps. The ligatures were a yard in length, composed of four or five threads of sewing silk, and armed with short needles bent to resemble a small fish hook. After the ligatures were introduced, their extremities were loosely tied behind the neck to prevent them from being confounded

with each other. They were inserted at a firm depth and at uniform points of contact.

Another delicate step is to make the excisions. The difficulty consists in fixing the loose edges of the fissure while the scarifications are performed in a deep and narrow cavity. To surmount these obstacles I contrived an instrument resembling a pair of forceps bent in an obtuse angle at the pivot, the beaks of which were terminated by transverse slips an inch in length, which closed firmly when the handles were pressed together. It was held with the left hand, and included just so much of the edge of the fissure as was necessary to be removed, which was done with a scalpel with surprising facility. Where the division approached the palatine bones, it did not require to be fixed, but resisted the knife by the strength of its adhesions.

I encountered no trouble in tying the ligatures with my fingers, which at once restored the palate to its natural expansion. The anterior ligature gave way the second day, leaving an aperture of the size of a six cent piece. Owing to the tension at this point I was obliged to repeat this ligature several times, and to detach the firm membrane from the bone by making punctures through it with a lancet. There is yet a trifling orifice, which will require a few applications of the cautery, but with this exception the palate is true to nature, even to the extremity of the uvula. It is perfect, and the result already is truly gratifying. The voice is greatly improved, is becoming daily more flexible, and will, I doubt not, be fully restored. I used no mechanical means to prevent the jaws from closing or to keep down the tongue, for the resolution of my patient rendered this measure unnecessary.

This operation cannot be practicable in young children, for the voluntary submission of the individual is essential to its success. It requires the energetic exercise of fortitude to suppress the propensity to cough and resist the burning thirst that accompanies the adhesive stage of union. My patient refrained from swallowing for two days; and until the ligatures were removed, which was on the fifth and sixth days, he took only fluids in small quantity.

Last year I witnessed the union of a finger which had been separated more than a quarter of an hour. A young man had two of these members cut off by a straw-cutter, the knife of which passed obliquely through the second phalangeal bone of the first finger, and the third of the second. When I came to dress the stumps and saw how clean a cut had been made, I proposed to bind on the severed part, which was conceived to be a great absurdity by the patient and bystanders. However, they were sent for, and found among the chaff, cold and pale. I immersed them a little while in warm water, and confined them upon the stumps with stitches and adhesive straps. The next day I was delighted to see the thermometer rise rapidly when the bulb was placed upon the dressings at the tips of the divided fingers. When the dressings were removed, I had the pleasure to find the second finger completely united, retaining, if I remember right, the nail. The other united partially, and during ten days I was in both hope and doubt. Living action resulted to a feeble extent, but finally ceased, and I was

reluctantly compelled to remove the mass which had become gangrenous. I am persuaded that when fingers and toes are struck off, their reunion will be almost certain, provided they are placed on while yet warm, and kept firm for a few days. It is well known, that holding by the slightest shred of integument, these members will unite; but it is questionable whether the circulation is re-established through the medium of the unsevered part, or by the mouths of the divided vessels.

*Greenfield, June, 1837.*

JAMES DEANE, M.D.

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#### CARIES OF THE BONES OF THE CRANUM AND THORAX.

EXTENSIVE DISEASE OF IMPORTANT VISCERA IN DIFFERENT CAVITIES OF THE BODY.

[Communicated for the Boston Medical and Surgical Journal.]

THE subject of the following case was not seen by the writer, until about three weeks before her decease: her history, before this time, from this and other circumstances, will be imperfect.

Mrs. P., aged 40, having never borne children, subject to periodical headaches and to dysmenorrhœa, was taken, some time in October last, with severe pains in the back part of the head and neck, preceded and attended with considerable derangement of the digestive organs. The menses became irregular in appearance; the left breast, and, afterwards, the glands in the axilla, enlarged and indurated. The right side of the tongue became paralysed, and deglutition extremely difficult. She began to complain, at the time I first saw her, of a continual ringing in her left ear; this continued until death, without intermission, increasing to a sound like the roaring of a cataract, during the paroxysms to which she was subject, and which will be hereafter noticed. Countenance harsh, sharpened, and betraying continual anxiety; unable to lay on either side without difficulty; sleeplessness; pulse varying from 100 to 130, very irregular; tongue clean at its tip, chapped and coated at its base. She was subject, a fortnight before death, to paroxysms, similar to those occurring in angina pectoris. On the 13th of May last, she died.

*Sectio Cadaveris.*—A tumor, of the size of a robin's egg, was found in the superior and posterior portion of the falx major. The tunica arachnoides, in patches, thickened and opaque. Caries of the sphenoid and occipital bones, at the sphenoo-occipital junction. The integuments, covering the upper portion of the sternum, presented the same irregular, hardened feeling, externally, as the breast; and on being divided, a dirty-grey, striated mass appeared, interspersed here and there with melanotic patches. Caries of the sternum; of the sternal extremities of the clavicles; of the first rib of the left, and of the four superior of the right side.

Appearances of the thoracic viscera. The lungs were studded, throughout, with tubercles. An enlarged lymphatic ganglion surrounded the bronchia, immediately before its bifurcation. About three pints of serum were removed from the cavity of the chest. On opening the peri-

cardium, a considerable quantity of fluid escaped. The heart was enlarged, accompanied with fatty degeneracy and softening of that organ. Ossification of the tricuspid valves.

Appearances of the abdominal viscera. Enlargement and induration of the liver. A large white tubercle was imbedded in the convex surface of its middle lobe. Texture of the spleen firm, resisting the edge of the knife almost like cartilage.

The uterus and the ovaries were scirrhouς; and, attached to the left one of the latter, was a single hydatid. The remaining viscera were apparently healthy.

CHARLES A. SAVERY, M.D.

*Hopkinton, N. H., June 14th, 1837.*

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## BOSTON MEDICAL AND SURGICAL JOURNAL.

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BOSTON, JUNE 28, 1837.

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### MALFORMATIONS AND DISEASES OF THE RECTUM AND ANUS.

IMMEDIATELY after announcing, a short time since, the death of George Bushe, M.D., of New York, Messrs. French & Adlard, publishers, of that city, kindly sent us a treatise with the above title, apparently completed just before the author was numbered with the silent dead. The circumstance is calculated to call forth a train of melancholy reflections. A slight, hasty turning over of the leaves, is sufficient to convince one, by the evident accuracy and care bestowed upon the colored drawings, that a man of genius has been taken from the world.

Dr. Bushe was born near Antrim, in Ireland, and had been a resident of New York about nine years, where he had acquired, says our correspondent, a great reputation as a scientific surgeon, whose place in the circle in which it was his happiness to move, cannot be easily filled. His papers, it is understood have been placed at the disposal of Dr. G. S. Bedford, to be published for the benefit of a bereaved family. The public, therefore, may expect a faithful biographical sketch of a gentleman who to brilliant attainments, added all the requisites for a well-founded celebrity, had Providence, whose ways are inscrutable, spared him to his admiring friends. He died on the 17th of May, of pulmonary consumption, in the 39th year of his age. After his arrival in this country he occupied the chair of anatomy in Rutgers Medical College, in which it is believed he continued till the final abandonment of that school by its board of professors.

The treatise in question is an octavo of 299 pages, accompanied by a quarto series of nine colored plates, denoting the unwearied exertions of Dr. Bushe in trying to convey accurate information to the reader on an obscure seat of disease. The plates are true to life, giving really painful representations of the *appearances* of the rectum and anus when inflamed and distorted by various morbid changes.

Following the anatomy of the rectum, the functions of that portion of the intestinal tube are considered. Next, malformations, the presence of

foreign bodies in it, lacerations, inflammations, and excoriations, are particularized. Diseased action, from the application of gonorrhœal matter, is carefully investigated. Fissures of the anus, neuralgia of the rectum, spasmoidic contractions of the sphincter ani, ulcerations, haemorrhoidal affections, enlargements of the haemorrhoidal veins, prolapsus of the rectum, relaxation of the anus, excrescences, polypi, abscesses, fistula, carcinomatous degeneration of the rectum, besides an infinitude of other collateral subjects connected with the surgery of this region, concur in making a practical guide in operative surgery, as useful in its particular department, for aught we can discover, as the surgical observations of Dr. Warren in that of tumors. Purchasers will find it at Mr. Ticknor's, and also at Mr. Jordan's, Washington street.

In future, the publishers will have the goodness to recollect that all new books should be on sale in Boston as soon as they are published in the other great cities : their success very much depends on this trifling circumstance.

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*Nitrate of Silver in Diseased Stomach.*—Dr. J. Johnson lately stated to the London Medical Society, that in cases of simple irritation of the stomach, in which the organ did not bear well the presence of food, and digestion did not proceed in the usual manner, in conjunction with the use of small quantities only of the most nutritious and digestible food, nitrate of silver had proved to be one of the best remedies in lessening the irritation of the organ. He generally began with half a grain, given in the course of a day in three doses, increasing it, if necessary, to a grain and a half in the same period, but seldom exceeding this. In epilepsy, however, he had given as much as eight grains in 24 hours. Dr. J. also stated that in a sub-inflamed state of the mucous membrane about the fauces, in which there was thickening of the membrane, elongation of the uvula, with harassing cough and other symptoms, the nitrate of silver might be used with advantage. A plan which had been adopted in these cases with success, was to dip the sponge of a probang into a solution of the nitrate, and push it down the pharynx until it reached the upper part of the œsophagus. Highly irritable ulcers had also been relieved by this remedy. Dr. J. had never seen but one case in which the skin had been tinged blue by this medicine, which was a case of epilepsy, but in which the patient had continued the medicine six weeks beyond the time to which he was ordered to continue it.

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*Castor oil Frictions in Gout.*—A writer in the London Lancet states that the “aristocratic complaint,” *podagra*, or gout, has been treated, with great success, by the external application of castor oil. The oil was rubbed into the affected limb at bed-time, which was then wrapped up in warm flannels. A very simple remedy, but probably worthy of trial in this painful disease.

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*Section of the Tendo Achillis for the relief of Club-feet.*—At a meeting of the Royal Medical and Chirurgical Society, London, in March last, John Whipple, Esq., Surgeon, of Plymouth, read a paper on the above subject. Two cases were related by him, in which he had practised the operation with entire relief. The first was a boy 8 years of age, who was born healthy and perfect, but invariably pitched forward on the

points of his toes as soon as he was put on his feet. The undue extension of the feet increased for several years, in spite of all the instrumental means of relief, and when the author first saw him he was incapable of locomotion without the aid of crutches. As the deformity appeared solely attributable to deficient length in the muscles or their tendons, Mr. W. determined to divide the tendons of the gastrocnemii. "The operation was performed by passing a narrow, curved bistoury downwards and outwards across the tendon, about two inches above the os calcis, and dividing it in the withdrawal of the bistoury. The external wound healed by the following day; in three weeks a firm band of connection was formed between the cut ends of the tendon; and in rather more than five weeks, the patient could stand alone. At the time the author wrote (six months after the operation), the patient could walk three miles without assistance.

"The second case was one of the more common form of club-foot, in which the sole is turned towards the opposite ankle. In this case, the operation was performed in the manner before described, and was attended with as great success. The tension of the tendons of the tibialis anticus and tibialis posticus generally co-existing with the same condition in the gastrocnemius, the author thinks would, in all instances, soon yield after the division of the tendo achillis."

Some of the members were of the opinion that in many cases of club-feet the bones and ligaments were affected, and the deformity therefore had nothing to do with the tendo achillis. A majority of the members, however, thought the operation likely to be advantageous in these troublesome deformities.

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*Lithotrity.*—Mr. Streeter stated, at a late meeting of the Westminster Medical Society, that the late Mr. Fernandez was in the habit of using the following method, in his operations for lithotrity. He saw that when the bladder was injected the surface would be no longer rugous, but smooth; the stone would be, consequently, sure to roll to the lowest spot. He made it a rule in his operations, therefore, to come exceedingly close to the stone (whether before or behind mattered not), without touching it; and then, having first opened his instrument, he gently pressed the part. The spot touched being thus made the lowest part of the bladder, the stone uniformly rolled into the instrument, and he had nothing to do but to close it, and crush the calculus.—*London Lancet.*

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*Medical Reminiscences.*—At a meeting of the freeholders and inhabitants of Cambridge Orderly, convened 10 March, 1728-9.

"Put to vote whither said inhabitants wd grant ye sum of fifty pounds for Joseph Hanford to fitt him out, in ye practice of physick, & it passed in the negative."

At a meeting of ye freeholders, &c—26th March 1729-30.

"Whereas Saml Danforth Esqr by the practice of Inoculation of ye Small pox has greatly endangered ye Town & distress'd Sundry families amongst us, which is very disagreeable unto us. Wherefore, Voted yt Said Saml Danforth Esqr be disered forthwith to Remove Such inoculated persons into some convenient place whereby our Town mayn't be exposed by them.

"Also Voted yt ye Revd Mr. President Wadsworth be earnestly de-

sired to prevent ye practice of inoculation of ye Small pox in ye Colledge and in ye Town on such as belong to yt Society ; that if it might be sd distemper might not prevail amongst us."

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*Vermont Academy of Medicine.*—The annual spring term of the Vermont Academy of Medicine, at Castleton, closed on Wednesday, June 7, 1837. The degree of M.D. was conferred on thirty-one gentlemen, and the degree of M.B. upon two. The honorary degree of M.D. was conferred upon Abraham Pulling, of Amsterdam, N. Y.

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*Post-mortem Reputation.*—Signor Segato, whose extraordinary preparations of the human body, and other animal substances, to suspend their decay, excited much curiosity, died lately at Florence. His secret perished with him. His death is said to have been hastened by vexation at the refusal of the Florentine government to assist him in his undertaking. Now, however, so high a value is set by that government on the preparations which he has left, that they have formally prohibited their removal from the country.—*Mag. of Popular Science, May.*

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*Medical Miscellany.*—Two cases of smallpox and one of varioloid have appeared at Springfield, one of which terminated fatally.—Emigrants from the United States are said to enjoy excellent health in Texas.—Dr. John B. McMunn, of the western part of New York, is said to have made an important discovery in the preparation of opium. It consists in the separation of its most effective ingredients in their natural state, viz., morphia, codien and narcein, in the natural combination in which they exist with meconic acid.—The Queen of England is said to be in a dangerous condition in consequence of the rupture of a bloodvessel.—Dr. Dudley, of Lexington, Ky., has performed the operation of lithotomy one hundred and thirty-eight times, without losing one patient by the operation.—A physician of Baltimore, twenty years ago, being then in great practice, used from sixteen to twenty half pounds of calomel yearly! At present one of the most extensive apothecaries in that city does not dispense, yearly, more than three pounds. This is an important fact for the Thomsonians to stereotype.—Dr. Collins, late master of Dublin Hospital, details the particulars of a case in which he heard the child cry, *in utero*, four hours before birth.—Asphyxiated children may frequently be resuscitated by applying the mouth to their breasts, and making a powerful suction.—Smallpox is thought to exist at Woolwich, Me., opposite Bath.—Dr. Plough, of N. Orleans, offers a premium of \$50 for the best essay in French or English, on the "Influence of Bathing;" and also the same for the best essay on the "Dangers of Interments in Cities," especially in a Southern climate.—Dr. H. Stone has gone into the government service, as surgeon, to be stationed at Fort Gibson, Arkansas.—Forty cases of smallpox occurred on board the ship Bangor, just arrived at New York, from Havre, several having died with it during the voyage.—A caricature of the Hygeian Pills has been published in London, representing the vegetable pills as sprouting up in different parts of the body from a poor fellow who had taken a dozen of them and then lain in the wet all night, in the shape of leeks, onions, carrots, &c.

**Medical Appointments.**—Ezra Palmer, Jr. M.D. has been elected physician and surgeon of the House of Industry, South Boston, in place of Dr. Perry, whose term of service has expired.—Dr. H. N. Baxley has been appointed Professor of Anatomy in the Baltimore Medical School, in the place of Dr. Geddings, who has removed to Charleston, S. C.

**To Correspondents.**—The communication of "Elliot" is received, and will appear in due time.—Among other accepted papers we acknowledge the receipt of Dr. Tuckerman's notes on St. Croix, as a winter residence for invalids. Also Dr. E. Quincy Sewell's translation of *Briere De Boisment*, on the establishment and government of Lunatic Asylums, from Dr. D. R. Beach., and Dr. Geo. Hayward's late discourse before the Mass. Med. Society—all of which will receive respectful notice and partial insertion as soon as prior manuscripts have been disposed of.

**DIED.**—At Sterling, Mass., Dr. Luther Allen, aged 64.—At Schenectady, N. Y. Dr. Joseph Yates.—At Sturbridge, Ms. Dr. Jacob Corey, aged 83.—At Jefferson Co. Va. Dr. Alfred T. Magill, 34, late Prof. of Med. in the University of Virginia.

Whole number of deaths in Boston, for the week ending June 24, 30. Males, 17—Females, 13.  
Consumption, 2—suicide, 1—inflamm. by a fall, 1—dropsey, 2—disease of the heart, 1—inflamm. of the stomach, 1—inflamm. of the lungs, 1—croup, 1—dropsey on the brain, 1—fits, 1—drowned, 2—apoplexy, 1—typhus fever, 1—dropsey in the chest, 1—scrofula, 1—infantile, 1—smallpox, 1—stillborn, 4.

#### PROLAPSUS UTERI CURED BY EXTERNAL APPLICATION.

DR. A. G. HULL'S UTERO-ABDOMINAL SUPPORTER is offered to those afflicted with *Prolapsus Uteri*, and other diseases depending upon relaxation of the abdominal muscles, as an instrument in every way calculated for relief and permanent restoration to health. When this instrument is carefully and properly fitted to the form of the patient, it invariably affords the most immediate immunity, from the distressing "dragging and bearing down" sensations which accompany nearly all visceral displace-ments of the abdomen, and its skilful application is always followed by an early confession of radical relief from the patient herself. The Supporter is of simple construction, and can be applied by the patient without further aid. Within the last two years 700 of the Utero-Abdominal Supporters have been applied with the most happy results.

The very great success which this instrument has met, warrants the assertion, that its examination by the Physician will induce him to discard the disgusting pessary hitherto in use. It is gratifying to state, that it has met the decided approbation of every member of the Medical Faculty who has ap-plied it, as well as every patient who has worn it.

The Subscribers having been appointed agents for the sale of the above instruments, all orders ad-dressed to them will be promptly attended to. Price, \$10.

LOWE & REED, Boston; DAVID KIMBALL, Portsmouth, N. H.; JOSHUA DURGIN, Portland, Me., JOSEPH BALCH, JR. Providence, R. I.; ELISHA EDWARDS, Springfield, Mass.; N. S. WORDEN, Bridgeport, Conn.

May 10—6m

#### RETREAT FOR INVALIDS AND INSANE IN PEPPERELL.

DR. N. CUTTER respectfully informs his friends and the public, that having completed the very extensive and important improvements to his establishment which he has for some time contemplated, he is now prepared to receive an additional number of patients. Another large and commodious building has just been erected, more particularly for the occupation of invalids, his pleasure-grounds have been improved, and such arrangements made as to secure his personal attention exclusively to the medical treatment of his patients. Able and experienced nurses will be in constant attendance, and every exertion made to render the establishment agreeable and useful to those who may be under its care.

31—June 21

Pepperell, Mass., June 1, 1837.

#### NEW MEDICAL BOOKS.

WILLIAM D. TICKNOR, *Medical Bookseller*, corner of Washington and School streets, has just received, *Surgical Observations on Tumors*, with Cases and Operations; illustrated with many colored engravings. By John C. Warren, M.D. Price \$4.50.

A Treatise on the Malformations, Injuries and Diseases of the Rectum and Anus; illustrated with plates. By George Bushe, M.D. Price \$3.25.

Also as above, may be found, a very complete assortment of Medical Books, which will be sold on the most reasonable terms.

June 14.

THE BOSTON MEDICAL AND SURGICAL JOURNAL is published every Wednesday, by D. CLAPP, JR. at 184 Washington Street, corner of Franklin Street, to whom all communications must be addressed *post-paid*. It is also published in Monthly Parts, each Part containing the weekly numbers of the preceding month, stitched in a cover. J. V. C. SMITH, M.D. Editor.—Price \$3.00 a year in advance, \$3.50 after three months, and \$4.00 if not paid within the year.—Agents allowed every seventh copy gratis.—Orders from a distance must be accompanied by payment in advance, or satisfactory reference.—Postage the same as for a newspaper.